

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Radiology Association PAC

ADDRESS (number and street) ▼

1891 Preston White Drive

☐ Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00343459

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2013

through

M M M / D D D / Y Y Y Y Y Y
09 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Taxin MD

Signature of Treasurer

Richard Taxin MD

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 08 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
09		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
09		30		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2013</div>		<div>599906.55</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>757215.43</div>	
(c) Total Receipts (from Line 19)	<div>100398.70</div>	<div>997925.00</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>857614.13</div>	<div>1597831.55</div>
7. Total Disbursements (from Line 31).....	<div>98484.04</div>	<div>838701.46</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>759130.09</div>	<div>759130.09</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09		01		2013

To:

M M	/	D D	/	Y Y Y Y
09		30		2013

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

83464.86

873274.87

(ii) Unitemized

16933.84

121953.68

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

100398.70

995228.55

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

100398.70

995228.55

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

2696.45

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

100398.70

997925.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

100398.70

997925.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1934.04	15436.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1934.04	15436.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	96500.00	818500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	50.00	4765.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	50.00	4765.45
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	98484.04	838701.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98484.04	838701.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	100398.70	995228.55
34. Total Contribution Refunds (from Line 28(d))	50.00	4765.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100348.70	990463.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1934.04	15436.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1934.04	15436.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven J Addonizio

Mailing Address 5203 Rio Vista Ln

City

Knoxville

State

TN

Zip Code

37919-8988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	3

Transaction ID : C2463711

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Deborah Gould Agisim

Mailing Address 5600 Laurium Rd

City

Charlotte

State

NC

Zip Code

28226-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	3

Transaction ID : C2518066

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

c. John Edward Agles

Mailing Address 116 Sundance Trail

City

Ormond Beach

State

FL

Zip Code

32176-5744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	3

Transaction ID : C2463801

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1290.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 120
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Harry Agress JR

Mailing Address Hackensack University Medical Ctr
30 Prospect Ave

City State Zip Code
Hackensack NJ 07601-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : C2497258

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Harry Agress JR

Mailing Address Hackensack University Medical Ctr
30 Prospect Ave

City State Zip Code
Hackensack NJ 07601-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2497259

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. Arthur S Albert

Mailing Address 124 W 60th St Apt 45

City State Zip Code
New York NY 10023-7402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : C2497250

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 120
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Arthur S Albert

Mailing Address 124 W 60th St Apt 45

City
New York

State Zip Code
NY 10023-7402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497251

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Bibb Allen JR

Mailing Address 3245 E Briarcliff Rd

City
Birmingham

State Zip Code
AL 35223-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montclair Baptist Medical Center

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

09 / 10 / 2013

Transaction ID : C2464036

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

C. Tate Brandon Allen

Mailing Address PO Box 4975

City
Tulsa

State Zip Code
OK 74159-0975

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Consultants of Tulsa

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 26 / 2013

Transaction ID : C2464052

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

905.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Timothy E Allen

Mailing Address 7538 SW Blue Inn Pl

City

Topeka

State

KS

Zip Code

66614-4674

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology & Nuclear Medicine, LLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	3		

Transaction ID : C2464054

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mark David Alson

Mailing Address 6641 N Forkner Ave

City

Fresno

State

CA

Zip Code

93711-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sierra Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	1	3		

Transaction ID : C2464085

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Srinivas Annamraju

Mailing Address 2205 Gilgit Court

City

Murrysville

State

PA

Zip Code

15668

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jeannette Dist Mem Hosp

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	3		

Transaction ID : C2464197

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

575.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Thomas A Applewhite

Mailing Address 13074 Starbuck Rd

City

Saint Louis

State

MO

Zip Code

63141-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : C2464234

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Raymond Alton ArmstrongMailing Address Radiology of Huntsville
2006 Franklin St SE Ste 200

City

Huntsville

State

AL

Zip Code

35801-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Medical Ctr-Montclair

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2013

Transaction ID : C2464281

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Sheri W Armstrong

Mailing Address 4355 E Waiola Loop

City

Kihei

State

HI

Zip Code

96753-8499

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

283.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2464296

Amount of Each Receipt this Period

283.39

SUBTOTAL of Receipts This Page (optional)..... ►

458.39

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Christopher B Baker

Mailing Address 109 Underwood Rd

City
Falmouth

State
ME

Zip Code
04105-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Spectrum Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2013

Transaction ID : C2464435

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Gory Ballester

Mailing Address PO Box 435

City

Adjuntas

State

PR

Zip Code

00601-0435

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Puerto Rico

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2013

Transaction ID : C2464496

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Marchello Joseph Barbarisi

Mailing Address 415 City Ave Apt 13

City

Merion Station

State

PA

Zip Code

19066-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C2496373

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

505.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Joseph Michael Barry

Mailing Address 161 Nathan Ln

City

Carlisle

State

MA

Zip Code

01741-1340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Commonwealth Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : C2503707

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Carlos Bazan III

Mailing Address 310 Tamworth Dr

City

San Antonio

State

TX

Zip Code

78213-1941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ. of Texas Health Science Ctr.

Occupation

Neuroradiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : C2464776

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Howard Marshall Bear

Mailing Address 4931 Pearlman Way

City

San Diego

State

CA

Zip Code

92130-2789

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2013

Transaction ID : C2464819

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

575.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Lance J Becker

Mailing Address 1405 Wesleys Run

City

Gladwyne

State

PA

Zip Code

19035-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2464852

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Andrew J Beloni

Mailing Address 5624 Laurium Rd

City

Charlotte

State

NC

Zip Code

28226-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2013

Transaction ID : C2464892

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kenneth G Berkenstock

Mailing Address Lancaster Radiology Associates
PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2013

Transaction ID : C2496650

Amount of Each Receipt this Period

84.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

274.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Sam Paul Bilyeu

Mailing Address 1315 County Rd 415

City
KillenState
ALZip Code
35645-7744FEC ID number of contributing
federal political committee.

C

Name of Employer
Vista Radiology, P.C.Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2465142

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. James E Blackwell

Mailing Address 5091 Crossbow Cir SW

City

Roanoke

State

VA

Zip Code

24018-8611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Assoc. of RoanokeOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 23 / 2013

Transaction ID : C2465224

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Justin Tyler Blum

Mailing Address 11 Kershaw Road

City

Wallingford

State

PA

Zip Code

19086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2465278

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

744.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Adam Russell Bogomol

Mailing Address 200 W 72nd St Apt 11K

City

New York

State

NY

Zip Code

10023-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2497234

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Adam Russell Bogomol

Mailing Address 200 W 72nd St Apt 11K

City

New York

State

NY

Zip Code

10023-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497235

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Marcela Bohm-Velez

Mailing Address Weinstein Imaging Associates
5850 Centre Ave

City

Pittsburgh

State

PA

Zip Code

15206-3780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weinstein Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 12 / 2013

Transaction ID : C2465422

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Bruce P Bordlee

Mailing Address 1301 W Dumbarton Dr

City	State	Zip Code
Lake Charles	LA	70605-2558

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
Radiology Associates of Southwest LA	Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2013

Transaction ID : C2465512

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michael Hamilton Brannon

Mailing Address 114 Holland Trace Cir

City	State	Zip Code
Simpsonville	SC	29681-5869

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
Greenville Radiology	Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2013

Transaction ID : C2465617

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

c. Chad William Brecher

Mailing Address 235 S Wayne Ave

City	State	Zip Code
Wayne	PA	19087-4820

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
Southeast Radiology	Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2465657

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

1182.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Thomas Andrew Brooks

Mailing Address 1930 Pickering Trl

City

Lancaster

State

PA

Zip Code

17601-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2496654

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Matthew E Brown

Mailing Address 6941 Lehigh Ct

City

Allentown

State

PA

Zip Code

18106-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Imaging of Lehigh Valley, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2465798

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Kenneth A Buckwalter

Mailing Address 8162 Round Hill Ct

City

Indianapolis

State

IN

Zip Code

46260-2910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 23 / 2013

Transaction ID : C2465882

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Joel A Budin

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : C2497032

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Joel A Budin

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2497033

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

c. Charles M Burkett

Mailing Address 6 Crooked Bridge Way

City

Ormond Beach

State

FL

Zip Code

32174-6752

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2466047

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1038.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Bruce E Burton

Mailing Address 3106 Oakridge Ct

City State Zip Code
 Owensboro KY 42303-2740

FEC ID number of contributing federal political committee.

C

Name of Employer
 Radiology PSC X-Ray Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 17 / 2013

Transaction ID : C2466100

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Oscar F Carbonell

Mailing Address 12 Broadriver Rd

City State Zip Code
 Ormond Beach FL 32174-8743

FEC ID number of contributing federal political committee.

C

Name of Employer
 Radiology Associates of Daytona Beach

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2466210

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. John Thomas Carroll

Mailing Address 4363 S Atlantic Ave

City State Zip Code
 Ponce Inlet FL 32127-6941

FEC ID number of contributing federal political committee.

C

Name of Employer
 Radiology Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2466261

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael I Chaliff

Mailing Address 195 Grogans Lake Point

City	State	Zip Code
Atlanta	GA	30350-3118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Diagnostic Imaging Specialists, P.A..Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2013

Transaction ID : C2466384

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mark Aaron Chambers

Mailing Address 1005 Des Peres Woods Ct.

City	State	Zip Code
Des Peres	MO	63131

FEC ID number of contributing
federal political committee.

C

Name of Employer
West County Radiological GroupOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : C2466395

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Jugesh Inder Cheema

Mailing Address 2466 Oak Bend Pl

City	State	Zip Code
Newburgh	IN	47630-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center of DelawareOccupation
Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2013

Transaction ID : C2518057

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ▶

400.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven Richard Chmielewski

Mailing Address 144 N Fairwood Dr

City	State	Zip Code
Sinking Spring	PA	19608-9802

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Good Samaritan Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2466645

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Regina Wong Chu

Mailing Address 15 Ogle Rd

City	State	Zip Code
Old Tappan	NJ	07675-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2013

Transaction ID : C2497232

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Regina Wong Chu

Mailing Address 15 Ogle Rd

City	State	Zip Code
Old Tappan	NJ	07675-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2497233

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

538.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Daniel T Cohen

Mailing Address 38 Lake Forest Dr

City

Richmond Heights

State

MO

Zip Code

63117-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiologic Imaging Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2013

Transaction ID : C2466928

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. James P Coleman II

Mailing Address 7357 Savannah Dr

City

Marion

State

MS

Zip Code

39342-9004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2013

Transaction ID : C2466964

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Pedro Collazo-Ornes

Mailing Address 3 Calle Nairn
Apt 9

City

San Juan

State

PR

Zip Code

00907-1569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2013

Transaction ID : C2482812

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Lisa Ann Collazzo

Mailing Address 3 Pennsford Ln

City

State

Zip Code

Media

PA

19063-2051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Southeast Radiology

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2466989

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Dennis E Perez Colon

Mailing Address 430 Dorado Beach East

City

State

Zip Code

Dorado

PR

00646-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vesa Alta Radiology

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C2518069

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Christopher J Conlin

Mailing Address 6590 Andersonville Rd

City

State

Zip Code

Clarkston

MI

48346-2794

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

DRA of Flint, PC

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2013

Transaction ID : C2467077

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

265.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Patrick M Conoley

Mailing Address 4527 Nenana Dr

City

Houston

State

TX

Zip Code

77035-3627

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 13 / 2013

Transaction ID : C2467095

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. W Shawn Conwell

Mailing Address 293 Piney Bluff Rd

City

Rembert

State

SC

Zip Code

29128-9630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pitts Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3749.94

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2013

Transaction ID : C2467133

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

c. Joseph E Cox

Mailing Address 1920 W Granada Blvd

City

Ormond Beach

State

FL

Zip Code

32174-6739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2467247

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2416.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 25 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven A Cremer

Mailing Address 5565 Julie Ann Rd

City

Bettendorf

State

IA

Zip Code

52722-1181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2013

Transaction ID : C2496686

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Cecil W Cupp III

Mailing Address Hot Springs Radiology Services
3633 Central Ave Ste D

City

Hot Springs

State

AR

Zip Code

71913-6404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hot Springs Radiology Services, Ltd.

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 14 / 2013

Transaction ID : C2518055

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Barry D Daly

Mailing Address 14103 Greencroft Lane

City

Hunt Valley

State

MD

Zip Code

21030-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Maryland

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 14 / 2013

Transaction ID : C2467513

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

665.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Hugh H DeLozier

Mailing Address 8936 Hemingway Grove Cir

City

Knoxville

State

TN

Zip Code

37922-8087

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2467743

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. John S DeMeritt

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2497248

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. John S DeMeritt

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497249

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

414.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Richard Lee Dobben

Mailing Address 1948 Cidermill Rd

City

Michigan City

State

IN

Zip Code

46360-9270

FEC ID number of contributing
federal political committee.

C

Name of Employer

MI City Radiologists, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2013

Transaction ID : C2468013

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Hans G Dransfeld

Mailing Address 187 Camelot Drive

City

Huntington

State

WV

Zip Code

25701-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2013

Transaction ID : C2468103

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Michael V Dutka

Mailing Address 1265 South Avignon Dr

City

Gladwyne

State

PA

Zip Code

19035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Affiliates of Central New Je

Occupation

Diagnostic Radiology

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2468225

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven A Ebner

Mailing Address 12 Camp David Rd

City	State	Zip Code
Wilmington	DE	19810-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0					2	0

Transaction ID : C2496315

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Amr Kamal El Jack

Mailing Address 2223 E Deerfield Drive

City	State	Zip Code
Media	PA	19063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5					2	0

Transaction ID : C2468408

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Paul H Ellenbogen

Mailing Address 4240 Prescott Ave Apt 7E

City	State	Zip Code
Dallas	TX	75219-2392

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Imaging & Interven specialis

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9					2	0

Transaction ID : C2468454

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

388.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Peter George Emanuel

Mailing Address 117 Amanda Pl

City	State	Zip Code
Oak Ridge	TN	37830-7814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vista Radiology, P.C.Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2468491

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. Margaret Y Emy

Mailing Address 245 Oxford Dr

City	State	Zip Code
Tenaflly	NJ	07670-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology GroupOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2013

Transaction ID : C2496695

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

c. Margaret Y Emy

Mailing Address 245 Oxford Dr

City	State	Zip Code
Tenaflly	NJ	07670-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology GroupOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2496696

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

392.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. William Scott Enochs

Mailing Address 230 Poplar Ave

City

Wayne

State

PA

Zip Code

19087-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Thomas Jefferson University Ho

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : C2496313

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kathryn L Everton

Mailing Address 4915 51st Ave S

City

Seattle

State

WA

Zip Code

98118-2051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Duke University

Occupation

Radiology Resident

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

Transaction ID : C2468694

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Timothy P Farrell

Mailing Address 128 Killarney

City

Williamsburg

State

VA

Zip Code

23188-8415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Peninsula Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2013

Transaction ID : C2468772

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Samuel H Feaster

Mailing Address 630 Cherokee Blvd

City

Knoxville

State

TN

Zip Code

37919-6616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2468838

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. George Joseph Ferrone

Mailing Address 440 E 62nd St Apt 18F

City

New York

State

NY

Zip Code

10065-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2496701

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. George Joseph Ferrone

Mailing Address 440 E 62nd St Apt 18F

City

New York

State

NY

Zip Code

10065-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2496702

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

414.28

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Adam Robert Fisher

Mailing Address 2035 Grantham Rd

City

Berwyn

State

PA

Zip Code

19312-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2469096

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Ethan Bradley Foxman

Mailing Address 1047 N Main St

City

West Hartford

State

CT

Zip Code

06117-2055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jefferson Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2469257

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Jeffrey James Freeman

Mailing Address 14924 Montclair Dr

City

Westfield

State

IN

Zip Code

46074-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2013

Transaction ID : C2469298

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

755.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. R Terrell Frey

Mailing Address 8700 Deep Run Ln

City

Cincinnati

State

OH

Zip Code

45243-1164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical X-Ray, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

Transaction ID : C2469339

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Christopher John Friend

Mailing Address 4735 Butler St Fl 2nd

City

Pittsburgh

State

PA

Zip Code

15201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inland Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2013

Transaction ID : C2469361

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. John W Gianini

Mailing Address 485 Chelsea Place Ave

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2013

Transaction ID : C2469608

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John W Gianini

Mailing Address 485 Chelsea Place Ave

City State Zip Code
Ormond Beach FL 32174

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2469606

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Richard Goldenson

Mailing Address 16 Brookfield Rd

City State Zip Code
Wellesley MA 02481-2421

FEC ID number of contributing federal political committee.

C

Name of Employer

Caritas Good Samaritan Hospita

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2013

Transaction ID : C2469758

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Eric Todd Goodman

Mailing Address 8933 Activity Rd

City State Zip Code
San Diego CA 92126-4427

FEC ID number of contributing federal political committee.

C

Name of Employer

Beth Israel Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2013

Transaction ID : C2469810

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Andrew Ryan Gordon

Mailing Address 150 Glenwood Road

City

Haddonfield

State

NJ

Zip Code

08033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	5		2	0	1	3		

Transaction ID : C2469849

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Robert A Goren

Mailing Address 722 Sussex Rd

City

Wynnewood

State

PA

Zip Code

19096-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	3		

Transaction ID : C2496289

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

c. Garth Prinsloo GrahamMailing Address Vista Radiology PC
2001 Laurel Ave Ste N304

City

Knoxville

State

TN

Zip Code

37916-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	9		2	0	1	3		

Transaction ID : C2469940

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

411.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Dana Ann Gray

Mailing Address 2225 Pinehurst Dr

City

Glenview

State

IL

Zip Code

60025-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Milwaukee Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : C2469982

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Thomas Justin Green JR

Mailing Address 11014 Hawkshead Ct

City

Windermere

State

FL

Zip Code

34786-5413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eastern Virginia Medical School

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : C2470009

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Labib Fouad Haddad

Mailing Address 4 Ramsgate Dr

City

Olivette

State

MO

Zip Code

63132-4116

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : C2470232

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

1300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Heather Griffith Hahn

Mailing Address 136 Bromley Dr

City

Wilmington

State

DE

Zip Code

19808-1370

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5					2	0

Transaction ID : C2470256

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Herbert Edward Hamilton

Mailing Address 6402 E 107th St

City

Tulsa

State

OK

Zip Code

74137-7025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Arkansas Rad. Assoc., P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3					2	0

Transaction ID : C2470385

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Gene Han

Mailing Address 24 Briarcliff Rd

City

Tenaflly

State

NJ

Zip Code

07670-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5					2	0

Transaction ID : C2497256

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

409.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Gene Han

Mailing Address 24 Briarcliff Rd

City

Tenafly

State

NJ

Zip Code

07670-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497257

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Daryl L Harp

Mailing Address 3911 Jackson Bend Dr

City

Louisville

State

TN

Zip Code

37777-3789

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2470603

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

C. David K Harry

Mailing Address 136 Highview Rd

City

Stephenson

State

VA

Zip Code

22656-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winchester Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 12 / 2013

Transaction ID : C2470649

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1623.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Kerri Lyn Harting

Mailing Address 523 E Jefferson Ave

City

Saint Louis

State

MO

Zip Code

63122-4544

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 13 / 2013

Transaction ID : C2470672

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. C Matthew Hawkins

Mailing Address 347 NW 52nd St

City

Seattle

State

WA

Zip Code

98107

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Cincinnati Medical Center

Occupation

Radiology Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 17 / 2013

Transaction ID : C2470760

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Rayda N Hernandez-Guash

Mailing Address 89 AVE DE DIEGO STE 105
PMB 525

City

San Juan

State

PR

Zip Code

00927-6370

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Puerto Rico

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 11 / 2013

Transaction ID : C2470991

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John Frederick Hiehle JR

Mailing Address 915 Westdale Avenue

City	State	Zip Code
Swarthmore	PA	19081-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast Radiology, Ltd.Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2471056

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Roy A Holliday

Mailing Address 70 6th Ave

City	State	Zip Code
Nyack	NY	10960-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beth Israel Medical CenterOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : C2471320

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. William S Holmes

Mailing Address 412 Kittredge Ct

City	State	Zip Code
Knoxville	TN	37922-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vista Radiology, P.C.Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2471331

Amount of Each Receipt this Period

354.28

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

994.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Mohsin Akber Husain

Mailing Address Virginia Radiology Associates PC
8629 Sudley Rd Ste 102

City Manassas State VA Zip Code 20110-4590

FEC ID number of contributing
federal political committee.

C

Name of Employer
Christiana Care Health Services

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 15 / 2013

Transaction ID : C2471522

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

B. James W Husted

Mailing Address Crozier-Chester Med Ctr
1 Medical Center Blvd

City Chester State PA Zip Code 19013-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast Radiology, Ltd.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2471539

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

c. Elizabeth Ann Ignacio

Mailing Address 71 Kamaiki Cir

City Kahului State HI Zip Code 96732-3153

FEC ID number of contributing
federal political committee.

C

Name of Employer
George Washington Med Center

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

09 / 15 / 2013

Transaction ID : C2471572

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

940.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Chakri Inampudi

Mailing Address 6125 Prominence Pointe Dr

City Anchorage State AK Zip Code 99516-5421

FEC ID number of contributing federal political committee.

C

Name of Employer
Alaska Radiology Associates

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 10 / 2013

Transaction ID : C2471585

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Robert Scott Israel

Mailing Address 3710 SW Hillside Dr

City Portland State OR Zip Code 97221-4106

FEC ID number of contributing federal political committee.

C

Name of Employer
Diagnostic Radiology, PC

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2013

Transaction ID : C2471632

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Abdel A A Jaffan

Mailing Address 1103 Ladson Ct

City Decatur State GA Zip Code 30033-5389

FEC ID number of contributing federal political committee.

C

Name of Employer
RI Medical Imaging

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 24 / 2013

Transaction ID : C2471677

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Cindy Janesky

Mailing Address Lancaster Radiology Associates
PO Box 3555

City Lancaster State PA Zip Code 17604-3555

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lancaster Radiology Associates

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2496661

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Anthony J Jennings

Mailing Address 15827 Sylvan Lake Dr

City Houston State TX Zip Code 77062-4795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Humana Hospital Clear Lake

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 14 / 2013

Transaction ID : C2471782

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Richard Wayne Johnson

Mailing Address 2236 Oakleigh Dr

City Murfreesboro State TN Zip Code 37129-0857

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midstate Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2013

Transaction ID : C2471895

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Peter Anthony S Johnstone

Mailing Address 8926 Waterside Cir

City

Indianapolis

State

IN

Zip Code

46278-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiation Oncology Division

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 22 / 2013

Transaction ID : C2471935

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Timothy Royal Jones

Mailing Address 42 Broadriver Rd

City

Ormond Beach

State

FL

Zip Code

32174-6785

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2471973

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Glenn E Jung

Mailing Address 3636 Captains Way

City

Knoxville

State

TN

Zip Code

37922-9411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2472066

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Monica J Kessi

Mailing Address Vista Radiology

2001 Laurel Ave Ste N304

City

Knoxville

State

TN

Zip Code

37916-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2472288

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. Monika L Kief-Garcia

Mailing Address 14136 Andy Pl

City

Riverside

State

CA

Zip Code

92508-8866

FEC ID number of contributing
federal political committee.

C

Name of Employer

Renaissance Radiology Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 23 / 2013

Transaction ID : C2472318

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. William Jay Kim

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : C2497236

Amount of Each Receipt this Period

33.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

887.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. William Jay Kim

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497237

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

B. Amy Briana Kirby

Mailing Address 14708 Hollyhock Dr

City

Oklahoma City

State

OK

Zip Code

73142-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eagle Eye Imaging

Occupation

Radiology Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1870.00

Date of Receipt

09 / 02 / 2013

Transaction ID : C2472459

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

C. Jay M Kleinman

Mailing Address 2130 Greenbrier Dr

City

Villanova

State

PA

Zip Code

19085-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2472527

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

383.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Scott David Klioze

Mailing Address 7 Cypress Hollow Ln

City

Ormond Beach

State

FL

Zip Code

32174-3047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2472551

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Keith Alan Knepel

Mailing Address 3390 Walden Ln

City

Oshkosh

State

WI

Zip Code

54904-9590

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 23 / 2013

Transaction ID : C2472562

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael V Korona JR

Mailing Address 118 Laurel Crossing

City

Huntington

State

WV

Zip Code

25705-2659

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 13 / 2013

Transaction ID : C2472729

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Tushar G Kothari

Mailing Address 3260 Legacy Trce

City

Cincinnati

State

OH

Zip Code

45237-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of NO. KY

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	6			2	0	1	3	

Transaction ID : C2472786

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Amy Louise Kotsenas

Mailing Address 721 12th Ave SW

City

Rochester

State

MN

Zip Code

55902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	0			2	0	1	3	

Transaction ID : C2472788

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Paul Kramer

Mailing Address 2147 Meadow Ridge Dr

City

Lancaster

State

PA

Zip Code

17601-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	7			2	0	1	3	

Transaction ID : C2496669

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 120
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Shane Arthur Kraske

Mailing Address 37 Columbine Ct

City

Iowa City

State

IA

Zip Code

52246-8716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiologic Medical Services, Coralvill

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2013

Transaction ID : C2472866

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Christopher James Krebs

Mailing Address 816 Ponce de Leon PI NE

City

Atlanta

State

GA

Zip Code

30306-3725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shands at the Univ of Florida

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2472880

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Carrie L Kresge

Mailing Address 10 Stoney Brook Blvd

City

Newtown Square

State

PA

Zip Code

19073-3953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2472892

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

890.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert L Krugman

Mailing Address 334 W 86th St Apt 4C

City

New York

State

NY

Zip Code

10024-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

09 / 05 / 2013

Transaction ID : C2497240

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Robert L Krugman

Mailing Address 334 W 86th St Apt 4C

City

New York

State

NY

Zip Code

10024-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497241

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Paul Lampert

Mailing Address 11595 E 26th St

City

Yuma

State

AZ

Zip Code

85367-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer

MDIG

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 02 / 2013

Transaction ID : C2473205

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Dale Lee

Mailing Address 6048 Snowshoe Circle

City

Bloomfield Hills

State

MI

Zip Code

48301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 21 / 2013

Transaction ID : C2473349

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Doris Lee

Mailing Address PO Box 8402

City

Atlanta

State

GA

Zip Code

31106-0402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Atlanta, PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 26 / 2013

Transaction ID : C2473350

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mark H LeQuire

Mailing Address 2055 Myrtlewood Dr

City

Montgomery

State

AL

Zip Code

36111-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montgomery Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 04 / 2013

Transaction ID : C2473416

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Paul Albert Leslie

Mailing Address 260 Eshelman Rd

City

Lancaster

State

PA

Zip Code

17601-5645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2013

Transaction ID : C2496671

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Robert W Levy

Mailing Address 2141 Villa Way

City

New Smyrna Beach

State

FL

Zip Code

32169-2089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2473513

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Pai-Chin Lin

Mailing Address 11055 SE 30th St

City

Bellevue

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2013

Transaction ID : C2473627

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John H Lohnes JRMailing Address Wichita Radiological Group PA
PO Box 8903

City	State	Zip Code
Wichita	KS	67208-0903

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wichita Radiological Group PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2013

Transaction ID : C2473737

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. H Esterbrook Longmaid III

Mailing Address 52 Harwich Rd

City	State	Zip Code
Chestnut Hill	MA	02467-3023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Deaconess Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2473774

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Kay Denise Spong Lozano

Mailing Address 5991 South High Court

City	State	Zip Code
Centennial	CO	80121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Imaging Association

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1881.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

Transaction ID : C2473903

Amount of Each Receipt this Period

209.00

SUBTOTAL of Receipts This Page (optional)..... ►

500.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Deborah Maria Lucas

Mailing Address 108 Waverly Cir

City
SalisburyState
NCZip Code
28144-9419FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeastern Radiology - Greensboro, N

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2473914

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Richard G Lucas

Mailing Address 457 Wood Duck Dr

City

Greensburg

State

PA

Zip Code

15601-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiologic Consultants, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2473919

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Hiten Maganlal Malde

Mailing Address 7 Kinkaid Ave

City

Closter

State

NJ

Zip Code

07624-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2013

Transaction ID : C2496691

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Hiten Maganlal Malde

Mailing Address 7 Kinkaid Ave

City State Zip Code
Closter NJ 07624-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2496692

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Daniel B Maloney

Mailing Address 19 Woodview Dr

City State Zip Code
Garnet Valley PA 19060-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Self-Employed Radiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 17 / 2013

Transaction ID : C2474175

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

c. Philip Laurence Manzanero

Mailing Address 88 Piikoi St Apt 2807

City State Zip Code
Honolulu HI 96814-4281

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Vista Radiology, P.C. Diagnostic Radiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2474222

Amount of Each Receipt this Period

354.28

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2884.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Philip N Massey

Mailing Address 14983 Gold Post Ct

City

Centreville

State

VA

Zip Code

20121-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Radiology Associates, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 23 / 2013

Transaction ID : C2474400

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

B. Geraldine B McGinty

Mailing Address 131 Avenue B Apt 3C

City

New York

State

NY

Zip Code

10009-5029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montefiore Imaging Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 20 / 2013

Transaction ID : C2474638

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. J Mark McKinney

Mailing Address Mayo Clinic

4500 San Pablo Rd

City

Jacksonville

State

FL

Zip Code

32224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2474722

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Frederick M McLean

Mailing Address 12 Palisades Pky

City

Oak Ridge

State

TN

Zip Code

37830-7200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2474749

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. Jose T Medina

Mailing Address CT Radiology Complex
PO BOX 602727

City

Bayamon

State

PR

Zip Code

00960-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT Radiology Complex

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 08 / 2013

Transaction ID : C2474805

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Manuel Medina

Mailing Address Advanced MRI & CT Institute
PO Box 1498

City

Vega Baja

State

PR

Zip Code

00694-1498

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwestern Radiology Services, PSC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 08 / 2013

Transaction ID : C2474849

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

404.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Patricia J Mergo

Mailing Address Mayo Clinic

4500 San Pablo Rd

City

Jacksonville

State

FL

Zip Code

32224-1865

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Florida Box 100374

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2013

Transaction ID : C2474987

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Clifford J Meservy

Mailing Address 1412 Kensington Drive

City

Knoxville

State

TN

Zip Code

37922

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2474996

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Daniel T Miles

Mailing Address Radiology Associates

1673 Mason Ave Ste 305

City

Daytona Beach

State

FL

Zip Code

32117-5516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2475062

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven G Miles

Mailing Address 33 Forrest View Wy

City

Ormond Beach

State

FL

Zip Code

32174-6759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2475065

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mitchell Alan Miller

Mailing Address 2 Constitution Ct Apt 1009

City

Hoboken

State

NJ

Zip Code

07030-6730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2496699

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Mitchell Alan Miller

Mailing Address 2 Constitution Ct Apt 1009

City

Hoboken

State

NJ

Zip Code

07030-6730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2496700

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1060.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven L Miller

Mailing Address 23 Moffat Rd

City

Waban

State

MA

Zip Code

02468-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Newton Wellesley Hosp

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 06 / 2013

Transaction ID : C2475184

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael Jason Milstein

Mailing Address 3335 Brookview Dr

City

Eugene

State

OR

Zip Code

97401-1595

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2475207

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jonathan Asher Morgan

Mailing Address 25 Roscommon Dr

City

Newtown Square

State

PA

Zip Code

19073-3047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2475354

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1390.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Demetrius Konstantine Morros

Mailing Address 7418 Ridgcrest Court Rd

City

Birmingham

State

AL

Zip Code

35242-0525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Birmingham Radiological Group P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5		2	0	1	3		

Transaction ID : C2475406

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Kurt Andrew Muetterties

Mailing Address 239 Painter Rd

City

Media

State

PA

Zip Code

19063-4518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5		2	0	1	3		

Transaction ID : C2475462

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Mohit Madan Naik

Mailing Address 424 W End Ave Apt 18C

City

New York

State

NY

Zip Code

10024-5785

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5		2	0	1	3		

Transaction ID : C2497246

Amount of Each Receipt this Period

38.46

SUBTOTAL of Receipts This Page (optional)..... ►

261.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 120
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Mohit Madan Naik

Mailing Address 424 W End Ave Apt 18C

City
New YorkState
NYZip Code
10024-5785FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	9			2	0	1	3

Transaction ID : C2497247

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

B. Khozaim Zein Nakhoda

Mailing Address 3831 Rotherfield Ln

City

Chadds Ford

State

PA

Zip Code

19317-8925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9									2	5		2	0	1	3

Transaction ID : C2475592

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Eric W Neils

Mailing Address 904 Squire Oaks Dr

City

Villa Hills

State

KY

Zip Code

41017-1371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of N KY

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9									0	8		2	0	1	3

Transaction ID : C2475639

Amount of Each Receipt this Period

182.50

SUBTOTAL of Receipts This Page (optional)..... ►

360.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. James Allan Newcomb

Mailing Address 1425 Princeton Ct

City

Allentown

State

PA

Zip Code

18104-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Imaging of Lehigh Valley

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	9			2	0	1	3

Transaction ID : C2475674

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Gregory Neal Nicola

Mailing Address 80 Riverside Blvd Apt 14P

City

New York

State

NY

Zip Code

10069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								0	5			2	0	1	3

Transaction ID : C2497254

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Gregory Neal Nicola

Mailing Address 80 Riverside Blvd Apt 14P

City

New York

State

NY

Zip Code

10069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	9			2	0	1	3

Transaction ID : C2497255

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

538.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Kevin M O'BrienMailing Address St Johns Macomb Hospital
11800 E 12 Mile Rd

City	State	Zip Code
Warren	MI	48093-3494

FEC ID number of contributing
federal political committee.

C

Name of Employer

Diagnostic Radiology Consultants, PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2013

Transaction ID : C2475955

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Andrew W Osiason

Mailing Address 506 Julie Ct

City	State	Zip Code
Wyckoff	NJ	07481-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2013

Transaction ID : C2497252

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Andrew W Osiason

Mailing Address 506 Julie Ct

City	State	Zip Code
Wyckoff	NJ	07481-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : C2497253

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Randolph Kevin Otto

Mailing Address Seattle Children's Hospital & Regi
4800 Sand Point Way NE

City	State	Zip Code
Seattle	WA	98105-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tacoma Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

Transaction ID : C2476175

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John Panaccione

Mailing Address 8673 Hampshire Glen Dr S

City	State	Zip Code
Jacksonville	FL	32256-9565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Orange Park Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2013

Transaction ID : C2476260

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. David Panush

Mailing Address 538 E 84th St Apt 4E

City	State	Zip Code
New York	NY	10028-7357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2013

Transaction ID : C2497230

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David Panush

Mailing Address 538 E 84th St Apt 4E

City
New York

State Zip Code
NY 10028-7357

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497231

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Salil P Parikh

Mailing Address 9477 Johnson Rd Ext

City
Germantown

State Zip Code
TN 38139-3603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Assoc of Ocala

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 20 / 2013

Transaction ID : C2476378

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Dhiren Y Patel

Mailing Address 1041 Bluestone Dr

City
Lititz

State Zip Code
PA 17543-6900

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lancaster Radiology Associates, Ltd.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2496681

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Divyesh Gaju Patel

Mailing Address 1143 Treadway Rd

City

Munster

State

IN

Zip Code

46321-2856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiologic Associates of Northwest Ind

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Transaction ID : C2476472

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Rita S Patel

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2013

Transaction ID : C2497228

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Rita S Patel

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : C2497229

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

160.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Sandip J Patel

Mailing Address 141 Beaumont Ct

City

Wilmington

State

NC

Zip Code

28412-8267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Delaney Radiologists, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 16 / 2013

Transaction ID : C2476623

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Sean David Paulsen

Mailing Address 548 Areva Rd Apt 68-8

City

Roosevelt

State

UT

Zip Code

84066-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 28 / 2013

Transaction ID : C2476675

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Mark William Peterson

Mailing Address Phoenix Radiology
531 4th Ave

City

Lewiston

State

ID

Zip Code

83501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phoenix Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 26 / 2013

Transaction ID : C2476788

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Carlton Thomas Phelps

Mailing Address AMCH A-113

43 New Scotland Avenue

City

Albany

State

NY

Zip Code

12208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 15 / 2013

Transaction ID : C2476819

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Clifford Douglas Phillips

Mailing Address 500 E 77th St Apt 2315

City

New York

State

NY

Zip Code

10162-0008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weill Cornell Medical College Departme

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 13 / 2013

Transaction ID : C2476832

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Sean Donovan Pierce

Mailing Address 509 48th Ave Apt 2A

City

Long Island City

State

NY

Zip Code

11101-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 05 / 2013

Transaction ID : C2497238

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

645.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Sean Donovan Pierce

Mailing Address 509 48th Ave Apt 2A

City State Zip Code
Long Island City NY 11101-5604

FEC ID number of contributing federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2497239

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Robert Pinsk

Mailing Address 146 Colket Ln

City State Zip Code
Devon PA 19333-1205

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C2496247

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Thomas Bernard Poulton

Mailing Address Aultman Hospital
2600 6th St SW

City State Zip Code
Canton OH 44710-1799

FEC ID number of contributing federal political committee.

C

Name of Employer

Aultman Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2013

Transaction ID : C2477118

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Hejung Press

Mailing Address 6717 Stone Mill Drive

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vista Radiology, P.C.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2477158

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. Mohammed Fareed Uddin Quraishi

Mailing Address 534 13th Ave W

City State Zip Code
Kirkland WA 98033-4831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radia, Inc.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2013

Transaction ID : C2477367

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Paul D Radecki

Mailing Address 1 Great Elm Ct

City State Zip Code
Potomac MD 20854-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 29 / 2013

Transaction ID : C2477384

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

654.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Shardan M Radmanesh

Mailing Address 3773 Branham Park

City

Lexington

State

KY

Zip Code

40515-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 15 / 2013

Transaction ID : C2477391

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Joel I Rakow

Mailing Address 505 Ivy Lane

City

Wyckoff

State

NJ

Zip Code

07481-1072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2497242

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Joel I Rakow

Mailing Address 505 Ivy Lane

City

Wyckoff

State

NJ

Zip Code

07481-1072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2497243

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Ravi Richard Ramnath

Mailing Address 127 Lansing Island Drive

City State Zip Code
Indian Harbour Beach FL 32937

FEC ID number of contributing
federal political committee.

C

Name of Employer

NSI

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2013

Transaction ID : C2477557

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Krish Ramprasad

Mailing Address 116 Harwicke Rd

City State Zip Code
Springfield PA 19064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2477572

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Vikram A Rao

Mailing Address 14348 Manderleigh Woods Dr

City State Zip Code
Town And Country MO 63017-8056

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

09 / 10 / 2013

Transaction ID : C2477604

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

682.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Falgun Mulchandbhai Rathod

Mailing Address 53 Hawthorne Rd

City

Grosse Pointe

State

MI

Zip Code

48236-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2013

Transaction ID : C2477644

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. James Vincent Rawson

Mailing Address Medical College of Georgia
1120 15th St BA1414

City

Augusta

State

GA

Zip Code

30912-0006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical College of Georgia

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 05 / 2013

Transaction ID : C2477691

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. William Leslie Ray

Mailing Address Bloomington Radiology SC
2200 Fort Jesse Rd Ste 280

City

Normal

State

IL

Zip Code

61761-2281

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bloomington Radiology SC

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 21 / 2013

Transaction ID : C2518067

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert A Rhodes III

Mailing Address 1041 Maple Ct

City

Athens

State

GA

Zip Code

30606-5746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Athens Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2013

Transaction ID : C2477868

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Philip J Rich

Mailing Address 6197 Contra Costa Rd

City

Oakland

State

CA

Zip Code

94611-2140

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 13 / 2013

Transaction ID : C2477879

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Craig Allan Roberto

Mailing Address 87 South Riverwalk Drive

City

Palm Coast

State

FL

Zip Code

32137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2477981

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 76 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David Alexander Roberts

Mailing Address 1005 Woodcircle Dr

City

Wynnewood

State

PA

Zip Code

19096-3900

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Jersey Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	13	/	2013

Transaction ID : C2477987

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sidney C Roberts III

Mailing Address 2408 Houser Rd

City

Knoxville

State

TN

Zip Code

37919-9324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	19	/	2013

Transaction ID : C2478004

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

C. Roberto A Rodriguez-Velez

Mailing Address Tivoli 16 Paseo Del Parque

City

San Juan

State

PR

Zip Code

00926-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	12	/	2013

Transaction ID : C2518054

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

879.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Roberto A Rodriguez-Velez

Mailing Address Tivoli 16 Paseo Del Parque

City

San Juan

State

PR

Zip Code

00926-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	3

Transaction ID : C2478097

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. John M Rogers

Mailing Address 802 West Gap Creek Road

City

Greer

State

SC

Zip Code

29651-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenville Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	3

Transaction ID : C2478130

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Toni C Roth

Mailing Address 7849 Stanford Ave

City

Saint Louis

State

MO

Zip Code

63130-3611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Illinois Neurosciences

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	3

Transaction ID : C2478263

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

117.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Gayle Ellen Roulier

Mailing Address Vista Radiology

2001 Laurel Ave Ste 304

City

Knoxville

State

TN

Zip Code

37916-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2478280

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. Eric Matthew Rubin

Mailing Address 220 Marcella Ln

City

Media

State

PA

Zip Code

19063-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2478315

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Edna M Ruiz

Mailing Address Romany Park C-4 3rd St

City

San Juan

State

PR

Zip Code

00926

FEC ID number of contributing
federal political committee.

C

Name of Employer

VA hospital

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C2503700

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

519.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Patricia H Saluk

Mailing Address 916 Winding Way

City State Zip Code
Media PA 19063-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2478497

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. Arthur D Sandy

Mailing Address 2136 Peacock Lane

City State Zip Code
Birmingham AL 35223-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Advanced Imaging Assoc of AL

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 27 / 2013

Transaction ID : C2478535

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Shekhar S Sane

Mailing Address 10710 N. Wood Crest Drive

City State Zip Code
Mequon WI 53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milwaukee Radiologists

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 13 / 2013

Transaction ID : C2478554

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

490.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert H Santee

Mailing Address 603 Rumblewood Ln

City

Seymour

State

TN

Zip Code

37865-5564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2478560

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Leah Eowyn Schafer

Mailing Address 10 Charlesden Park

City

Newton

State

MA

Zip Code

02460-2228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Newton Wellesley Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 24 / 2013

Transaction ID : C2478717

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Michael Ross SchieringMailing Address Radiology Associates
1673 Mason Ave Ste 305

City

Daytona Beach

State

FL

Zip Code

32117-5516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2478754

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Martin Lee Schwartz

Mailing Address Radiology Associates of Birmingham
 2090 Columbiana Rd Ste 4400

City Birmingham State AL Zip Code 35216-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Birmingham, PC

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2013

Transaction ID : C2503704

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gregory Jay Schwartzman

Mailing Address 126 Mill Brook Ln

City Media State PA Zip Code 19063-6319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2478925

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Gary W Scott

Mailing Address Radiology Group, PA
 1825 Park Pl

City Montgomery State AL Zip Code 36106-1126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 23 / 2013

Transaction ID : C2478944

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

740.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Varian C Scott IIIMailing Address Radiology Assoc of Birmingham PC
2090 Columbiana Rd Ste 4400

City	State	Zip Code
Birmingham	AL	35216-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Assoc of Birmingham

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2478947

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ali R Sepahdari

Mailing Address 11826 Dorothy St Apt 301

City	State	Zip Code
Los Angeles	CA	90049-5384

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Illinois

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2013

Transaction ID : C2479050

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Stephen A Sevigny

Mailing Address 1325 Oak Forest Dr

City	State	Zip Code
Ormond Beach	FL	32174-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2479064

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 83 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Stephen A Sevigny

Mailing Address 1325 Oak Forest Dr

City

Ormond Beach

State

FL

Zip Code

32174-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / 23 / 2013

Transaction ID : C2479066

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Kambiz Kevin Shamlou

Mailing Address 1507 Oak Forest Dr

City

Ormond Beach

State

FL

Zip Code

32174-3409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2479140

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Wales Reng Shao

Mailing Address 474 48th Ave Apt 26B

City

Long Island City

State

NY

Zip Code

11109-5620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Main Street

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 07 / 2013

Transaction ID : C2479143

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Nancy Marie SherwinMailing Address The Lankenau Hospital
100 E Lancaster Ave

City	State	Zip Code
Wynnewood	PA	19096-3483

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : C2496244

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Leigh S Shuman

Mailing Address 1182 Oakmont Dr

City	State	Zip Code
Lancaster	PA	17601-5079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

Transaction ID : C2496675

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Richard W Sibley

Mailing Address 3621 Cantwell Blvd

City	State	Zip Code
Fort Wayne	IN	46814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : C2479398

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

340.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Lonnie D Simmons

Mailing Address Gundersen/Lutheran Med Ctr
1900 South Ave C02-002

City La Crosse State WI Zip Code 54601-5494

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gundersen Lutheran Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 20 / 2013

Transaction ID : C2518056

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Roy J Siragusa

Mailing Address 28 Winding Creek Way

City Ormond Beach State FL Zip Code 32174-6773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2479541

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Stefan M Skalina

Mailing Address 19 Brookside Rd

City Wallingford State PA Zip Code 19086-6208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2479571

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1223.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. J Charles Smith

Mailing Address 9350 N Ashford Ave

City

Fresno

State

CA

Zip Code

93720-0736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wishon Radiological Med Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 26 / 2013

Transaction ID : C2479670

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kevin L Smith

Mailing Address Regional Diagnostic Radiology
1990 Connecticut Ave S Ste 100

City

Sartell

State

MN

Zip Code

56377-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Regional Diagnostic Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 20 / 2013

Transaction ID : C2479702

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Curt M Snyder

Mailing Address 37 Solar Way

City

Morrisonville

State

NY

Zip Code

12962-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Associates in Radiology of Plattsburgh

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 26 / 2013

Transaction ID : C2479778

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

708.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Damon Randall Soeiro

Mailing Address 102 S Swarthmore Ave

City	State	Zip Code
Swarthmore	PA	19081-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2479826

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. David J St Germain

Mailing Address 6 Forrest Ct

City	State	Zip Code
Metairie	LA	70001-6155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology and Interven Assoc of MetairOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2013

Transaction ID : C2479940

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Neil E Staib JR

Mailing Address 6898 Wes Curt Ln

City	State	Zip Code
Goshen	OH	45122-9545

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2479952

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

755.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Gail E Starr

Mailing Address Hackensack Univ Med Ctr
 20 Prospect Ave Ste 513

City Hackensack State NJ Zip Code 07601-1962

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hackensack Radiology Group

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2013

Transaction ID : C2496697

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Gail E Starr

Mailing Address Hackensack Univ Med Ctr
 20 Prospect Ave Ste 513

City Hackensack State NJ Zip Code 07601-1962

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hackensack Radiology Group

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2496698

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Eric J Stein

Mailing Address Bryn Mawr Hospital
 130 S Bryn Mawr Ave

City Bryn Mawr State PA Zip Code 19010-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Radiology Associates of the Main Line

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : C2496243

Amount of Each Receipt this Period

108.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jason M Stoane

Mailing Address 2369 N Shore Rd

City
Bellingham

State
WA

Zip Code
98226-7851

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Radiologists, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 13 / 2013

Transaction ID : C2480212

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Joseph R Stock

Mailing Address 115 Plush Mill Road

City
Wallingford

State
PA

Zip Code
19086-6018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2480225

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

c. Alan Howard Stolpen

Mailing Address Univ of Iowa Hosp and Clinics
200 Hawkins Dr

City
Iowa City

State
IA

Zip Code
52242-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Iowa Hosp and Clinics

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2480238

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1140.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 90 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Melvin Stone

Mailing Address 303 Ocean Shore Blvd

City

Ormond Beach

State

FL

Zip Code

32176-5738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	3

Transaction ID : C2480244

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Joshua West Stuhlfaut

Mailing Address 52 S Station St

City

Duxbury

State

MA

Zip Code

02332-4535

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Associates of Plymouth

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	3

Transaction ID : C2480336

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Sunitha Sunkavalli

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	3

Transaction ID : C2497244

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

1269.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Sunitha Sunkavalli

Mailing Address 943 High Mountain Rd

City State Zip Code
 Franklin Lakes NJ 07417-1619

FEC ID number of contributing federal political committee.

C

Name of Employer
 Hackensack Radiology Group

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 19 / 2013

Transaction ID : C2497245

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Joseph H Tashjian

Mailing Address 807 Summit Ave

City State Zip Code
 Saint Paul MN 55105-3355

FEC ID number of contributing federal political committee.

C

Name of Employer
 St. Paul Radiology

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 10 / 2013

Transaction ID : C2480620

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Charles Franklin Tate III

Mailing Address 1090 SW 15th St

City State Zip Code
 Boca Raton FL 33486-6858

FEC ID number of contributing federal political committee.

C

Name of Employer
 Radiologists of N. Ft. Lauderdale, PA

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 09 / 2013

Transaction ID : C2480627

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

561.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Heather C Tauschek

Mailing Address 11600 Moose Rd

City

Anchorage

State

AK

Zip Code

99516-2477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2013

Transaction ID : C2480650

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Richard N Taxin

Mailing Address 5 Hilltop Rd

City

Rose Valley

State

PA

Zip Code

19086-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2013

Transaction ID : C2480659

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Shawn DeWayne Teague

Mailing Address 11844 Tarver Ct

City

Fishers

State

IN

Zip Code

46037-8277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Univ School of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2013

Transaction ID : C2480698

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1240.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Kurt E Tech

Mailing Address 84 Stephens Rd

City

Grosse Pointe Farms

State

MI

Zip Code

48236-3625

FEC ID number of contributing
federal political committee.

C

Name of Employer

William Beaumont Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2480704

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Bruce J Thaler

Mailing Address 110 S Front St Ste 800

City

Philadelphia

State

PA

Zip Code

19106-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2480730

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Sean Edward Theisen

Mailing Address 1346 Whispering Maples Ct

City

Ann Arbor

State

MI

Zip Code

48108-2492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Huron Valley Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 23 / 2013

Transaction ID : C2518068

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

2140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey L Thomasson

Mailing Address 3 Brookside Ln

City

Saint Louis

State

MO

Zip Code

63124-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2013

Transaction ID : C2480830

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Eric Frank Tocci

Mailing Address 437 Triton Road

City

Ormond Beach

State

FL

Zip Code

32176-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2480941

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. John Christopher Tonkin

Mailing Address 1937 Southcreek Blvd

City

Port Orange

State

FL

Zip Code

32128-7376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : C2480954

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2075.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Patrick J Toth

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 05 / 2013

Transaction ID : C2496689

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Patrick J Toth

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2496690

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Michael J Tuite

Mailing Address 7699 Leta Way

City

Verona

State

WI

Zip Code

53593-8631

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 13 / 2013

Transaction ID : C2481130

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David Barry Turetsky

Mailing Address 608 John Anderson Dr

City State Zip Code
Ormond Beach FL 32176-4763

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Daytona Beach

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : C2481139

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Steven Robert Urbanski

Mailing Address 67 Marbern Drive

City State Zip Code
Suffield CT 06078-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jefferson Radiology Group, PC

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 13 / 2013

Transaction ID : C2481191

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Peter R Wahba

Mailing Address 261 Woodhill Ln

City State Zip Code
Media PA 19063-1964

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 30 / 2013

Transaction ID : C2496241

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1540.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 97 OF 120
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jean Chi Wang

Mailing Address 101 Blue Heron Ln

City	State	Zip Code
Heath	TX	75032-7645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Albert Einstein Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2013

Transaction ID : C2481597

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Marc S Weinstein

Mailing Address 8379 E Tailfeather Dr

City	State	Zip Code
Scottsdale	AZ	85255-6459

FEC ID number of contributing
federal political committee.

C

Name of Employer

EVDI Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

Transaction ID : C2481759

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Paul N Weiss

Mailing Address 856 NE Capital Blvd

City	State	Zip Code
Salt Lake City	UT	84103-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah Imaging Associates, LLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : C2481781

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Simon Westacott

Mailing Address 1965 Glendower Dr

City

Lancaster

State

PA

Zip Code

17601-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2496679

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Patrick Noel Weybright

Mailing Address 1234 Mastersonville Rd

City

Manheim

State

PA

Zip Code

17545-9461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 27 / 2013

Transaction ID : C2496678

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Michael B Whiteside

Mailing Address 10 Stonebriar Dr

City

Slingerlands

State

NY

Zip Code

12159

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 16 / 2013

Transaction ID : C2481967

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

565.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John P Williams III

Mailing Address 1500 Halesworth Ln

City

Knoxville

State

TN

Zip Code

37922-8561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

354.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2013

Transaction ID : C2482055

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

B. C Amy Wilson

Mailing Address 146 W Tulpehocken St

City

Philadelphia

State

PA

Zip Code

19144-2620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2013

Transaction ID : C2482080

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Mark D Wittry

Mailing Address 10525 Concord School Rd

City

Saint Louis

State

MO

Zip Code

63128-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group, Inc.

Occupation

Cardiac Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2013

Transaction ID : C2482198

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

577.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert Wolek

Mailing Address 31 Dairy Hill Rd

City

Madison

State

CT

Zip Code

06443-2491

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lourdes Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2013

Transaction ID : C2482209

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Keith Woodward

Mailing Address 3861 Dellwood Dr

City

Knoxville

State

TN

Zip Code

37919-6634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2482303

Amount of Each Receipt this Period

354.28

Full Name (Last, First, Middle Initial)

C. Donovan Lyle Yamada

Mailing Address 4370 Sailmaker Cir

City

Chattanooga

State

TN

Zip Code

37416-1675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vista Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

354.28

Date of Receipt

09 / 19 / 2013

Transaction ID : C2482370

Amount of Each Receipt this Period

354.28

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

958.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Clement Yang

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

09 / 05 / 2013

Transaction ID : C2496693

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Clement Yang

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

09 / 19 / 2013

Transaction ID : C2496694

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Mark Ming-Yi Yeh

Mailing Address 330 Cordova St Unit 311

City

Pasadena

State

CA

Zip Code

91101-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mark M. Yeh, M.D., Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 25 / 2013

Transaction ID : C2482486

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

88.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Thomas J Yuschok

Mailing Address 162 Laurelwood Ln

City

Ormond Beach

State

FL

Zip Code

32174-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	3

Transaction ID : C2482590

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Fernando M ZalduondoMailing Address Sancti Spiritus Park
1058 Ashford Ave Apt 800

City

San Juan

State

PR

Zip Code

00907-1272

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Petricio MRI & Ct Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	3

Transaction ID : C2482610

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. David Zander

Mailing Address 20 Chapel St Apt A410

City

Brookline

State

MA

Zip Code

02446-7405

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Iowa Hospital and Clinic

Occupation

Radiology Resident

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	3

Transaction ID : C2482655

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 103 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Harry G Zegel

Mailing Address 156 Valley Rd

City

Ardmore

State

PA

Zip Code

19003-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : C2496234

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Beth Zigmund

Mailing Address 412 Spruce St

City

Haddonfield

State

NJ

Zip Code

08033-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hahnemann University Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2013

Transaction ID : C2482778

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

540.00

83464.86

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Bank of America - Hard

Mailing Address

City State Zip Code

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : D150570

Amount of Each Disbursement this Period

1934.04

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1934.04

1934.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. BIG RED POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 785

City	State	Zip Code
ELKHORN	NE	68022

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	12	/	2013

Transaction ID : D150320

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Carl Sciortino Committee

Mailing Address 17 Orchard St

City	State	Zip Code
Medford	MA	02155-4323

Purpose of Disbursement
political contribution

Candidate Name

Carl Sciortino

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MA District: 05

Disbursement For:	2014
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D150569

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CMR POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2485

City	State	Zip Code
SPRINGFIELD	VA	22152

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2013

Transaction ID : D150269

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Conservatives Restoring Excellence (CRE-PAC)

Mailing Address PO BOX 98629

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : D150186

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. DEMOCRATS RESHAPING AMERICA (DREAMPAC)

Mailing Address 1212 S. VICTORY BLVD.

City	State	Zip Code
BURBANK	CA	91502

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : D150271

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. DEMOCRATS WIN SEATS (DWS PAC)

Mailing Address 1071 TWIN BRANCH LN

City	State	Zip Code
WESTON	FL	33326

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2013

Transaction ID : D150184

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. FIRST STATE PAC

Mailing Address P.O. BOX 3006

City
WILMINGTONState
DEZip Code
19804

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2013

Transaction ID : D150302

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. LEGPAC

Mailing Address 38 IVY ST., SE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

Transaction ID : D150258

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. KINZINGER FOR CONGRESS

Mailing Address PO BOX 2365

City
OTTAWAState
ILZip Code
61350

Purpose of Disbursement

Candidate Name

Rep. Adam Kinzinger

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149611

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. ADRIAN SMITH FOR CONGRESS

Mailing Address 3321 AVENUE I

City	State	Zip Code
SCOTTSBLUFF	NE	69361

Purpose of Disbursement

Candidate Name

Rep. Adrian Smith

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	---

State: NE District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149209

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHNSON FOR CONGRESS

Mailing Address P.O. BOX 14496

City	State	Zip Code
POLAND	OH	44514

Purpose of Disbursement

Candidate Name

Rep. Bill Johnson

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	---

State: OH District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149805

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. BILLY LONG FOR CONGRESS

Mailing Address 3246 E. RIDGEVIEW STREET

City	State	Zip Code
SPRINGFIELD	MO	65804

Purpose of Disbursement

Candidate Name

Rep. Billy Long

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	---

State: MO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2013

Transaction ID : D149505

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. CATHY MCMORRIS RODGERS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2013

Mailing Address BOX 137

City	State	Zip Code
SPOKANE	WA	99210

Transaction ID : D149313

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Rep. Cathy McMorris RodgersCategory/
Type

1000.00

Office Sought:



House

Disbursement For: 2014



Primary

☐ General☐ Other (specify) ▼

State: WA

District: 05

Full Name (Last, First, Middle Initial)

B. VAN HOLLEN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2013

Mailing Address 10537 ST. PAUL ST.

City	State	Zip Code
KENSINGTON	MD	20895

Transaction ID : D149671

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Rep. Chris Van HollenCategory/
Type

2500.00

Office Sought:



House

Disbursement For: 2014



Primary

☐ General☐ Other (specify) ▼

State: MD

District: 08

Full Name (Last, First, Middle Initial)

C. BENISHEK FOR CONGRESS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2013

Mailing Address PO BOX 108

City	State	Zip Code
GLADSTONE	MI	49837

Transaction ID : D149813

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Rep. Dan BenishekCategory/
Type

2500.00

Office Sought:



House

Disbursement For: 2014



Primary

☐ General☐ Other (specify) ▼

State: MI

District: 01

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. GREGG HARPER FOR CONGRESS

Mailing Address POST OFFICE BOX 54344

City
PEARLState
MSZip Code
39288

Purpose of Disbursement

Candidate Name

Rep. Gregg Harper

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: MS

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149764

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BILIRAKIS FOR CONGRESS

Mailing Address PO BOX 606

City
TARPON SPRINGSState
FLZip Code
34688

Purpose of Disbursement

Candidate Name

Rep. Gus Bilirakis

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149455

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO BOX 87

City
UWCHLANDState
PAZip Code
19480

Purpose of Disbursement

Candidate Name

Rep. Jim Gerlach

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2013

Transaction ID : D149932

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. CROWLEY FOR CONGRESS

Mailing Address 84-56 GRAND AVENUE

City	State	Zip Code
ELMHURST	NY	11373

Purpose of Disbursement

Candidate Name

Rep. Joseph Crowley

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 14

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : D149231

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. CROWLEY FOR CONGRESS

Mailing Address 84-56 GRAND AVENUE

City	State	Zip Code
ELMHURST	NY	11373

Purpose of Disbursement

Candidate Name

Rep. Joseph Crowley

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 14

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : D149612

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. KURT SCHRADER FOR CONGRESS

Mailing Address PO BOX 3314

City	State	Zip Code
OREGON CITY	OR	97045

Purpose of Disbursement
political contribution

Candidate Name

Rep. Kurt Schrader

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: OR District: 05

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Transaction ID : D150568

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. LANCE FOR CONGRESS

Mailing Address PO BOX 225

City
COLONIAState
NJZip Code
7067

Purpose of Disbursement

Candidate Name

Rep. Leonard LanceOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2013

Transaction ID : D149634

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT LINDA SANCHEZ

Mailing Address 410 1ST ST SE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

Rep. Linda T. SanchezOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 38

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	27	/	2013

Transaction ID : D149834

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STUTZMAN FOR CONGRESS

Mailing Address PO BOX 129

City
HOWEState
INZip Code
46746

Purpose of Disbursement

Candidate Name

Rep. Marlin StutzmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2013

Transaction ID : D149758

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL GRIMM FOR CONGRESS

Mailing Address PO BOX 61806

City	State	Zip Code
STATEN ISLAND	NY	10306

Purpose of Disbursement

Candidate Name

Rep. Michael G. Grimm

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 11

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : D149738

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City	State	Zip Code
LYNDORA	PA	16045

Purpose of Disbursement

Candidate Name

Rep. Mike Kelly

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: PA District: 03

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2013

Transaction ID : D149711

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City	State	Zip Code
LYNDORA	PA	16045

Purpose of Disbursement

Candidate Name

Rep. Mike Kelly

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: PA District: 03

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2013

Transaction ID : D149211

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. ANDREWS FOR CONGRESS

Mailing Address 215 FOURTH AVENUE

City	State	Zip Code
HADDON HEIGHTS	NJ	7076

Purpose of Disbursement
political contribution

Candidate Name

Rep. Robert E. AndrewsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Transaction ID : D150567

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement

Candidate Name

Rep. Steny H. HoyerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : D149833

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1400

City	State	Zip Code
MELVILLE	NY	11747

Purpose of Disbursement

Candidate Name

Rep. Steve IsraelOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

Transaction ID : D149840

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. RE-ELECT TIM GRIFFIN FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 7526

City LITTLE ROCK	State AR	Zip Code 72217
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Purpose of Disbursement

Candidate Name

Rep. Tim Griffin

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2013

Transaction ID : D149244

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF TODD YOUNG, INC.

Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402
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Purpose of Disbursement

Candidate Name

Rep. Todd Young

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : D149606

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF TODD YOUNG, INC.

Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402
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Purpose of Disbursement

Candidate Name

Rep. Todd Young

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2013

Transaction ID : D149882

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. IOWANS FOR LATHAM

Mailing Address PO BOX 8237

City	State	Zip Code
DES MOINES	IA	50301

Purpose of Disbursement

Candidate Name

Rep. Tom Latham

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2013

Transaction ID : D149651

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TOM REED FOR CONGRESS

Mailing Address PO BOX 391

City	State	Zip Code
GENEVA	NY	14456

Purpose of Disbursement

Candidate Name

Rep. Tom Reed

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Transaction ID : D149413

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MIKE LEE INC

Mailing Address 10 WEST BROADWAY

City	State	Zip Code
SALT LAKE CITY	UT	84101

Purpose of Disbursement

Candidate Name

Sen. Mike Lee

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: UT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2013

Transaction ID : D149844

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Radiology Association PAC

A. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City	State	Zip Code
BANGOR	ME	4402

Purpose of Disbursement

Candidate Name

Sen. Susan Collins

Office Sought:	<input type="checkbox"/>	House
	<input checked="" type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D149659

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

00500 00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Warren D Goldstein

Mailing Address 48 Pourtales Rd

City	State	Zip Code
Colorado Springs	CO	80906-3634

Purpose of Disbursement
refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : D150571

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

50.00
